



## DEPARTMENT OF CORRECTIONS POLICIES AND PROCEDURES

Policy No.: DOC 1.5.10	Subject: <b>REGISTRATION OF SEXUAL AND VIOLENT OFFENDERS</b>	
Chapter 1: ADMINISTRATION AND MANAGEMENT	Page 1 of 4, plus attachment	
Section 5: Case Records / Good Time	Revision Date: March 19, 1998	
Signature: /s/ by Director Rick Day 3/19/98	Effective Date: March 17, 1997	

### I. POLICY:

It is the policy of the Montana Department of Corrections to enforce the various provisions of the Montana Codes Annotated relative to the release, registration and notification requirements for sexual and violent offenders.

### II. AUTHORITY:

46-18-201, MCA. Sentences That May Be Imposed.  
46-18-202, MCA. Additional Restrictions on Sentencing.  
46-18-254, MCA. Release of Sexual or Violent Offender.  
46-18-255, MCA. Sentence Upon Conviction.  
46-23-501 through 508, MCA. Sexual or Violent Offender Registration Act.  
53-1-201, MCA. Purpose of the Department of Corrections.  
53-1-203, MCA. Powers and Duties of the Department of Corrections.  
41-5-1513, MCA. Delinquent Youth--Restrictions.  
DOC Policy 1.1.3. Organization and Responsibility.

### III. DEFINITIONS:

**Sexual Offense** means any violation of or attempt, solicitation, or conspiracy to commit a violation of 45-5-502 (3), 45-5-503, 45-5-504(2)(c), 45-5-507 (unless the act occurred between two consenting persons 16 years of age or older), or 45-5-625 or any violation of a law of another state or the federal government reasonably equivalent to a violation listed in 46-23-502(3)(a), MCA.

**Violent Offense** means any violation of or attempt, solicitation, or conspiracy to commit a violation of 45-5-102, 45-5-103, 45-5-202, 45-5-206 (third or subsequent offense), 45-5-301 (when victim is less than 18 years of age and the offender is not a parent of the victim), 45-5-302, 45-5-303, 45-5-401, 45-5-603(1)(b), or 45-6-103; or any violation of a law of another state or the federal government reasonably equivalent to a violation listed in 46-23-502(9)(a), MCA.

Policy No.: DOC 1.5.10	Chapter: Administration and Management	Page 2 of 4
Subject: <b>REGISTRATION OF SEXUAL AND VIOLENT OFFENDERS</b>		

**Sexual or Violent Offender** means a person who has been convicted of a sexual or violent offense as defined in the Montana Codes Annotated or adjudicated and court ordered pursuant to 41-5-1513(1)(d).

**Release from Custody**, for the purposes of this policy, means placement of an offender outside of the confines of a state correctional facility on parole, probation, intensive supervision, discharge, pre-release, or other community placement status in, or out, of the State of Montana. It also means release from one residential correctional facility to another or to the community.

#### **IV. PROCEDURES:**

##### **A. Registration of Adult Sexual and Violent Offenders**

##### **1. Registration of persons in the physical custody of the Department**

- a. Institutional Probation and Parole Officer staff will inform each offender convicted of a sexual or violent offense, and scheduled for release from the Department's custody, of the offender's statutory obligation to register with local law enforcement offices, and will record the intended address of each offender not less than 10 days prior to the release of the offender.
- b. Prior to the release of the offender from custody, Institutional Probation and Parole Officer staff shall obtain and give to the Department of Justice and the sheriff of the county in which the offender intends to reside or, if the offender intends to reside in a municipality, to the chief of police of the municipality:
  - 1) the address at which the offender intends to reside upon release from the facility's custody;
  - 2) the offender's fingerprints and photo, unless they are already in the possession of the Department of Justice, sheriff, or chief of police; and
  - 3) a form signed by and read to or by the offender stating that the offender's duty to register under this part has been explained to the offender.
- c. Notification of offenders housed in a correctional facility must be made in advance of release, and offenders will be required to sign a form attesting to their notification by correctional facility officials.

Policy No.: DOC 1.5.10	Chapter: Administration and Management	Page 3 of 4
Subject: <b>REGISTRATION OF SEXUAL AND VIOLENT OFFENDERS</b>		

- d. Pre-release staff will inform each offender convicted of a sexual or violent offense to register with local law enforcement offices within 10 days of the offender's arrival at a pre-release center. Offenders failing to register may be prosecuted under 46-23-507, MCA, and will be subject to disciplinary action.

At least 10 days prior to release from the pre-release center program or regional prison, the Probation and Parole Officer II or Institutional Probation and Parole Officer will inform the offender in writing (see section 9 the attached form) pursuant to 46-23-505, MCA, to re-contact local law enforcement within 10 days to inform officials of the offender's intended address change.

## **2. Registration of persons under community supervision or referral by Probation and Parole to a pre-release center or Intensive Supervision Program (ISP).**

- a. Probation and parole staff shall confirm that each offender convicted of a sexual or violent offense who is remanded to their supervision has complied with the offender's statutory obligation to register with local law enforcement officials. The Probation and Parole officer must record the intended address of the offender.
- b. Probation and parole staff will complete the Department of Justice Sexual/Violent Offender notification and registration forms (attached) and mail these forms to that Department.

## **B. Notification of Level Of Risk to Reoffend of Sexual Offenders in Custody**

For any offender who has not received a level of risk designation at the time of sentencing, the Department will provide notice to the Department of Justice and local law enforcement of the risk of reoffense by a sexual offender who is being released from a state or private correctional facility. The notice will be prepared by treatment staff and will indicate the level of risk posed by the sexual offender in accordance with the following:

1. level 1, the risk of a repeat sexual offense is low;
2. level 2, the risk of a repeat sexual offense is moderate; or
3. level 3, the risk of a repeat sexual offense is high.

## **C. Dissemination of Information to the Public**

Policy No.: DOC 1.5.10	Chapter: Administration and Management	Page 4 of 4
Subject: <b>REGISTRATION OF SEXUAL AND VIOLENT OFFENDERS</b>		

Information must be disseminated according to 46-23-508, MCA.

**D. Registration of Delinquent Youth in the Physical Custody of the Department.**

1. Any juvenile offender found to be delinquent and ordered to register as a sexual or violent offender pursuant to an adjudication and disposition under 41-5-1513, MCA is required to register pursuant to Title 46, Chapter 23, part 5, MCA.
2. Prior to release, youth correctional facility staff will inform in writing (see section 9 of the attached form) each delinquent youth subject to registration, and scheduled for release from the Department's custody, of the delinquent youth's statutory obligation to register with local law enforcement offices, and will record the intended address of the delinquent youth.
3. Prior to the release of the delinquent youth from custody, youth correctional facility staff shall obtain and give to the Department of Justice and the sheriff of the county in which the youth intends to reside or, if the youth intends to reside in a municipality, to the chief of police of the municipality:
  - a. the address at which the youth intends to reside upon release from the facility's custody;
  - b. the youth's fingerprints and photo, unless they are already in the possession of the Department of Justice, sheriff, or chief of police; and
  - c. a form signed by and read to or by the youth stating that the youth's duty to register under this part has been explained to the youth.
4. Notification of youth housed in a juvenile correctional facility must be made at least 10 days in advance of release, and youth will be required to sign a form attesting to their notification by juvenile correctional facility officials.

**E. Applicability Dates**

These registration provisions apply to:

1. sexual offenders who are sentenced or who are in custody or under the supervision of the Department on or after July 1, 1989; and
2. violent offenders who are sentenced or who are in the custody or under the supervision of the Department on or after October 1, 1995.

**V. CLOSING:**



## Montana Department of Justice Sexual and Violent Offender Registration Form

### Section 1

**Current Date:** This field is automatically entered if you use the form on the computer. If you are completing this form by hand, enter the date you registered the offender.

**Form Use:** Check the appropriate box to indicate the status of the registration information you are providing. If this registrant is registering for the first time in Montana, check the first box, "Submitting New Registration." If you are updating information on an existing registrant, check the second box, "Updating Registration Info." If you are correcting information from previously submitted registration information [incorrect street number for an address, incorrect date of birth, incorrect tier level, etc.], check the third box, "Correcting Registration Info." You should indicate in Section 10 of the registration form, Additional Information and Comments, what field of information is being corrected.

**Form Completed by:** Enter the name of the officer/person who gathered the information for this registration form, along with the agency the person works for and the telephone number that can be used to contact him/her should any questions arise regarding the registration form. Please do not have the offender fill out the registration form.

### Section 2

**Conviction Type:** Indicate from where the registrant's qualifying offense/s originated.

**Offense Type:** Indicate if the registrant is a sexual or violent offender, or both. "Both" indicates the registrant has a conviction for a qualifying sexual offense and a qualifying violent offense.

**Tier Level:** Indicate the tier level for any Montana-convicted sexual offender. The tier level should be provided by the sentencing court and designated in the judge's sentencing order, if the offender was sentenced on or after October 1, 1997, which is when the tier levels were enacted in Montana. Violent offenders are not assigned tier levels. Federal sexual offenders will not have tier levels. Out-of-state sexual offenders may have tier levels assigned by their respective states, but they are not automatically adopted in Montana.

**Release or Transfer Date:** Enter the registrant's release or transfer date from prison, jail, pre-release, etc.

**Release or Transfer Comments:** Provide any relevant comments regarding the registrant's transfer or release from a facility, i.e., flat discharge, parole or probation, etc.

### Section 3

**Last Name:** Enter the registrant's last name.

**First Name:** Enter the registrant's first name.

**Middle Name:** Enter the registrant's middle name.

**Date of Birth:** Enter the registrant's date of birth using yyyy-mm-dd.

**AKA:** Provide any common aliases used by the registrant; indicate a maiden name, if applicable. If the alias or married name is recent, a new registration fingerprint card should be taken to add the alias to the registrant's Montana record.

**Social Security Number:** Enter the registrant's nine digit social security number.

**Montana State ID:** Enter the registrant's criminal history record number for Montana. This number is NOT the registrant's social security number. The Montana State ID number is MT + 8 digits.

**Sex:** Indicate if the registrant is male or female.

## Section 4

**Physical Address:** Specify where the offender physically resides in the community. If this location cannot receive mail, a mailing address must also be provided. Complete directions to the place of residence must be provided if no physical address is available. Include the City, County, State, Zip Code, and Telephone Number in the appropriate fields for the address.

**Mailing Address:** Specify the address where the offender receives mail, if different from the physical address. **If the mailing address is different than the physical address, a physical address MUST be provided as stated above!** Include the City, County, State, Zip Code, and Telephone Number in the appropriate fields for the address.

## Section 5

**Employer :** Provide the name of the business where the registrant works. If the registrant is self-employed, enter "Self" in this field. If the registrant is unemployed, enter "Unemployed."

**Occupation:** Provide the type of work the registrant does, i.e., cook, dishwasher, computer programmer, accountant, etc.

**Employment Address:** Provide the address where the registrant goes to work. If the registrant is a truck driver or travels for business, try indicating statewide or nationwide, etc.

**Telephone:** Provide a work number, if available, where the registrant can be reached at work.

## Section 6

**Sentence Date:** Enter the date the registrant was sentenced for the qualifying offense/s using yyyy-mm-dd.

**Offense/s:** Enter qualifying offense/s only for which the offender is registering.

**Court Cause No:** Enter the Cause Number for the offense/s as filed with the court.

**Place of Sentence:** Enter the city and state where the registrant was convicted/sentenced.

## Section 7

**License Plate No:** Enter the license plate number of the vehicle the registrant owns or uses.

**State:** Enter the state of the license plate of the vehicle the registrant owns or uses.

**Year:** Enter the year of the vehicle the registrant owns or uses.

**Make:** Enter the make of the vehicle the registrant owns or uses, i.e., Honda, Ford, etc.

**Model:** Enter the model of the vehicle the registrant owns or uses, i.e., Civic, Escort, etc.

**Color:** Enter the color/s of the vehicle the registrant owns or uses.

**Owner:** Indicate if the registrant owns the vehicle s/he uses.

**DL No:** Enter the registrant's driver license number.

**State:** Enter the state in which the registrant's driver license has been issued.

## Section 8

**Number of Victims:** Indicate the number of victims involved with the offense/s for which the registrant is registering.

**Victim/s Age:** Indicate the age of the victim/s involved with the offense/s for which the registrant is registering.

**Victim/s Sex:** Indicate the sex of the victim/s involved with the offense/s for which the registrant is registering.

**Victim Relationship:** Indicate the relationship between the offender and the victim, i.e., babysitter, father, brother, friend, boss, etc.

**Place of Crime:** Indicate the city and state of where the offense/s occurred.

**Force Used:** Indicate if any force was used to commit the registering offense.

**Type of Force:** If you checked "Y" in the "Force Used" field, enter the type of force used in this field, i.e., hands, gun, knife, rope, etc.

**Other Comments:** Use this field to provide any further relevant information.

**Source of Section 8 Info:** Indicate where this section's information came from: arrest report, court documents, etc. Try to avoid using the registrant as a source of information.

## Section 9

**Sex Offender Treatment Status:** Check the appropriate box regarding a sexual offender's status with treatment. Enter the appropriate dates the registrant started, will start, or finished treatment.

**Comments:** Indicate any relevant information regarding the sexual offender's treatment. Also indicate source of treatment information, i.e., the registrant, prison papers, etc. Use Section 10, Additional Information and Comments, to indicate a treatment provider's name/phone number, if available, to confirm registrant's information on treatment status

## Section 10

**Additional Information and Comments:** Use this space to provide additional information you feel important to document. This field may be used to explain an earlier field in more detail or perhaps to provide additional information/comments, i.e., "this registrant changes appearances often," or "this registrant has an extensive criminal history including x, y, and z," or "registrant lives with another registrant; both are currently under no supervision," etc.

## Acknowledgements – Page 2

The registrant should initial each requirement listed, regardless of relevance. The registrant's initials indicate s/he has read the requirements, not that s/he necessarily agrees with them. After initialing each requirement, the registrant must print and sign his/her name with the current date in the presence of a witness, who must also print and sign his/her name with the current date.

Please return the completed 2-page registration form, along with one set of registration fingerprints and one quality photograph to the address listed at the bottom of the second page.

**\*It is imperative to fingerprint new registrants at the time of registration in order to be completely registered and processed into the central registry. The registration fingerprint card verifies through fingerprint comparison that this registrant's existing Montana criminal record is in fact his/her record. Otherwise, the registration fingerprint card establishes a Montana record for those registrants new to the Montana system. The fingerprint card allows us to have their criminal history record flagged as a Registered Sexual or Violent Offender, which is then available to law enforcement agencies everywhere.**

Note: If an offender was adjudicated as a juvenile and court-ordered by the judge to register OR if the offender was convicted of an offense not requiring registration but was court-ordered by the judge to register, PLEASE submit a copy of the judgement indicating registration is required along with the complete registration packet.





# Montana Department of Justice

## Sexual and Violent Offender Registration Form

FORM MUST BE COMPLETED BY THE AGENCY PLEASE TYPE OR PRINT

1

Current Date:	Form Use:	Form Completed by [name, agency, and telephone]:
2005-08-01	<input type="checkbox"/> Submitting New Registration <input type="checkbox"/> Updating Registration Info <input type="checkbox"/> Correcting Registration Info	

2

Conviction Type:	Offense Type:	Tier Level:	Release or Transfer Date:
<input type="checkbox"/> Montana <input type="checkbox"/> Out-of-state <input type="checkbox"/> Federal	<input type="checkbox"/> Sexual <input type="checkbox"/> Violent <input type="checkbox"/> Both	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> None	 Release or Transfer Comments:

3

Last Name:	First Name:	Middle Name:	Date of Birth:
AKA:	Social Security Number:	Montana State ID:	Sex:
		MT	<input type="checkbox"/> M <input type="checkbox"/> F

4

Physical Address:	City:	County:	State:	Zip:	Telephone:
Mailing Address:	City:	County:	State:	Zip:	Telephone:

5

Employer:	Occupation:	Employment Address:	Telephone:

6

Sentence Date:	Offense/s:	Court Case No:	Place of Sentence [city and state]:

7

License Plate No:	State:	Year:	Make:	Model:	Color:	Owner:	DL No:	State:
						<input type="checkbox"/> Y <input type="checkbox"/> N		

8

Number of Victims:	Victim/s Age:	Victim/s Sex:	Victim Relationship:	Place of Crime [city and state]:
Force Used?	Type of Force:	Other Comments:	Source of Section 8 Info:	
<input type="checkbox"/> Y <input type="checkbox"/> N				

9

Sex Offender Treatment Status [if applicable]:	Comments:
<input type="checkbox"/> Currently in Treatment <input type="checkbox"/> Not in Treatment <input type="checkbox"/> Completed Treatment	Date Started: Date to Begin: Date Completed:

10

Additional Information and Comments:

C:

**Montana Department of Justice**  
**Sexual and Violent Offender Registration Form**

**EACH STATEMENT BELOW MUST BE READ TO AND INITIALED BY THE REGISTRANT. Not all statements apply to each registrant. All statements should be initialed to indicate the registrant understands the requirements. Unless otherwise noted, the following statements reflect the requirements as stated in the Montana Codes Annotated, 46-23-501 et. al.**

- \_\_\_ I understand that I am required to provide the Montana Department of Justice a set of registration fingerprints and a current photograph, when necessary, in order to keep my registration current.
- \_\_\_ I must register with local law enforcement within 10 days of entering a county of Montana if: a) I was sentenced for a sexual or violent offense in another state and come to reside in Montana for a period of 10 days or more, or b) I return to Montana after residing out of state; or c) I temporarily work or attend school in Montana for a period of 10 days or more.
- \_\_\_ I must give written notice within 10 days of changing my address to the agency with which I last registered. A Post Office box address is **not** sufficient unless a physical address is also provided or, if no physical address is available, complete directions to my place of residence.
- \_\_\_ If I was convicted of a sexual offense, I must register for the rest of my life. After 10 years of registration, I may petition the sentencing court or the district court where I reside for an order relieving me of registration. Being released from probation or parole does not automatically relieve my duty to register.
- \_\_\_ If I was convicted of a violent offense, I must register for 10 years. If I am convicted of another felony offense during this time I will be required to register for life. I must petition the sentencing court or the district court where I reside for an order relieving me of registration. Release from probation or parole does not automatically relieve my duty to register.
- \_\_\_ I will receive an address verification letter in the mail from the Montana Department of Justice once a year, or every 90 days if I was designated a level 3 sex offender. I have 10 days to return the letter after signing it before a notary public. If I do not receive an address verification letter a year from now [or 90 days from now], I should call 444-9479.
- \_\_\_ If I move to another state, I must register in that state within 10 days of my arrival. I must also inform my last registering agency in Montana IN WRITING that I have moved out of their jurisdiction to keep my Montana registration file current. If I move back to Montana, I will be required to register within 10 days.
- \_\_\_ If I fail to register or to keep my registration current and accurate, I could be convicted of a separate felony offense and sentenced to prison for up to 5 years, fined \$10,000, or both.
- \_\_\_ I must pay for costs associated with registration. I will be notified of the amount of the costs and to what agency they must be paid.
- \_\_\_ I must submit to a DNA sample as required under Montana law, per MCA 44-6-103.

**I have read and/or had read to me, the above requirements. These requirements have been explained to me and I understand my duty to register and that failure to do so is a criminal offense.**

Please print:

Registrant	_____	Signature	_____	Date	_____
Witness	_____	Signature	_____	Date	_____

**For court-ordered juveniles registrants, the court documentation MUST accompany this registration form.**

**Please return this 2-page form to:**

**Sex and Violent Offender Registration  
Department of Justice  
PO BOX 201417  
Helena MT 59620-1417**

**C:**



# MONTANA DEPARTMENT OF JUSTICE

Sexual Violent Offender Registry  
303 N Roberts 3rd Floor, PO Box 201417, Helena, MT 59620  
406-444-2797

## SVOR CHANGE OF ADDRESS FORM

Date: \_\_\_\_\_ Time: \_\_\_\_\_  
Name: \_\_\_\_\_ DOB: \_\_\_\_\_  
Type of Offender Sexual ☐ Violent ☐ Both ☐ Date of Residency: \_\_\_\_\_  
Old Address: \_\_\_\_\_  
New Address: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
Phone #: \_\_\_\_\_ Msg. #: \_\_\_\_\_

### New Information:

Vehicles: License Plate: \_\_\_\_\_ Year: \_\_\_\_\_ Make: \_\_\_\_\_  
Model: \_\_\_\_\_ Color: \_\_\_\_\_  
License Plate: \_\_\_\_\_ Year: \_\_\_\_\_ Make: \_\_\_\_\_  
Model: \_\_\_\_\_ Color: \_\_\_\_\_

Employment: Employer Name: \_\_\_\_\_  
Occupation: \_\_\_\_\_  
Phone #: \_\_\_\_\_

Are you currently a student? ☐ Yes ☐ No

If YES, name of the school(s) you are enrolled in.

\_\_\_\_\_  
\_\_\_\_\_

According to Montana Code 46-23-505 Notice of change of address, duty to inform, forwarding of information. "...the offender shall within 10 days of the change give written notification of the new address to the agency with whom the offender last registered." MCA 46-23-507 Penalty. "A sexual or violent offender who knowingly fails to register, verify registration, or keep registration current under this part may be sentenced to a term of imprisonment of not more than 5 years or may be fined not more than \$10,000 or both.

**I affirm that the information provided in this change of address form is complete and accurate.**

\_\_\_\_\_  
Offender Name: (Print)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Offender Signature

\_\_\_\_\_  
Witness Name: (Print)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Witness Signature